LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

2200 St. Marys Ave Lincoln, NE 68502-3785 (402) 471-8000

NON TRANSFERABLE

PERMIT

Permit
SEWAGE INSTALLATION

No. 92380089701

Issued 08/18/92
Expires 02/18/93
Revenue Code 18754

Establishment
TIM LINDSTROM
T9N R6E SEC 17
HITCHINGPOST 3RD ADD BLK 4 LOT 2

FEES: $150.00

TOTAL $150.00

Permittee
TIM LINDSTROM
BOX 57083
LINCOLN NE 68505

Issued By M. Jane Ford
Health Director

THIS LICENSE OR PERMIT IS ISSUED SUBJECT TO REVOCATION AS PROVIDED BY LAW
"POST IN A PROMINENT PLACE"

FORM 20103-0477
REQUEST FOR SITE CLEARANCE AND PERMIT
FOR INDIVIDUAL SEWAGE DISPOSAL SYSTEM
City Ordinance No. 9150 ☒
County Resolution No. 2832 ☐

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502
Phone: 471-7800

A

FILING FEE: $ 150.00

FILE NO. _____

DATE: July 27th

The undersigned hereby requests SITE CLEARANCE and PERMIT to construct an Individual Sewage Disposal System in conformance with appropriate resolution or ordinance, as described herein:

1. Legal description of property: Twp. 9N ; Range 6E ; Section 17 ;
   Block 4 : Lot 2 : Addition Hutchinson Post Tired Addition
   Street Address 3000 W. Paddock

2. Property Use: Residential ☒ ; Commercial ☐ Other Use ☐
   No. of Bedrooms 3 . Describe _____

3. Type of Individual Sewage Disposal System: Septic Tank ☒ ; Other ☐

4. Distance to public sewer: _____ ft.

Tim Q. (Birchwood Builders)
Signature of Applicant (Owner or Lessee)

P.O. Box 57083
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 8/10/92. Date Frwd. 8/11/92. ACTION: Approved ☒ Disapproved ☐ Signature: Gerald C. Hood
2. Supt. Bldg. Insp.: or Village Clerk: Date Rec'd. 8/11/92. Date Frwd. 8/11/92. ACTION: Approved ☒ Disapproved ☐ Signature: Mel Gobla
3. City or County Engineer: Date Rec'd. 8-11-92. Date Frwd. 8-11-92. ACTION: Approved ☒ Disapproved ☐ Signature: RJ Martin

REMARKS OR REASONS FOR DISAPPROVAL NEED DRAWINGS: ADVISED INSTALLER

Site Visits:
Date: 9-22 by: JC
Date: _____ by: _____
Date: _____ by: _____

White: Health Dept. Copy
Yellow: Engineers Copy
Pink: Bldg. Inspector's Copy

INSTALLATION FINAL WRITTEN APPROVAL
Date: 9/28/92 By: John Chen
plans rec'd

FORM 23-43

FORM 20105-0477
SOIL ABSORPTION TEST DATA REPORT
(Annex to Application)
(Reference: City Ordinance No. 9150 and County Resolution No. 2832)

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502
Phone: 471-7800

B

FILE NO. _____

PROPERTY WHERE SOIL TESTED: 3000 W Padock Blk 4 Lot 2

Location: Township _____; Range _____; Section & ¼ Section _____.
Property Dimensions: _____ ft. x _____ ft. Area: _____ acres. (Attach Sheet C with sketch of property).

Soil Type: Silty Clay ☐ ; Silty Clay Loam ☒ ; Sandy Loam ☐ ; Silt Loam ☐ ; Clay Loam ☐

Dates of Tests: 7-27 to 7-~~29~~ 31. Weather: Precip. _____ Temp. _____

OWNER: _____

Address: _____

PERCOLATION TEST DATA TABLE

a.	b.	c.	d.	e.	f.	g.	h.	i.	j.	k.	l.	m.	n.
		Pre-Saturation Period				Percolation Readings						Results	
		Start		End		Start			End				
Hold No.	Hole Depth (in.)	Date (Mo./ Day)	Time (Hr./ Min.)	Date (Mo./ Day)	Time (Hr./ Min.)	Date (Mo./ Day)	Time (Hr./ Min.)	Water Level (in.)	Time (Hr./ Day)	Water Level (in.)	Elapsed Time (Min.)	Water Level Drop (in.)	Percolation Rates (Min./in.)
1	30	7-29	4:00	7-31	8:00	7-31	~~8:00~~ 10:30	~~10½~~ 8⅛	11:00	~~10½~~ 8⅛	30	—	
2								11		11⅛		⅛	
3								12		12¼		¼	
4								13½		14		½	
5								13½		14¼		¾	
6								13⅝		13⅜		½	
7								14½		15		½	
8								12½		13		½	
9								12¾		13¼		½	
10													

Sum of Percolation Rates: _____
Average of Rates: _____
Mean of Rates: _____

Larry Schwarck Surveying
Signature of Person Conducting Test

Address 8200 W Cheney Rd. Phone 489-7294

(Do not write below this line)

REVIEWING ACTION

Remarks: _____

Soil Type (SCS): Wymore Silty Clay Loam

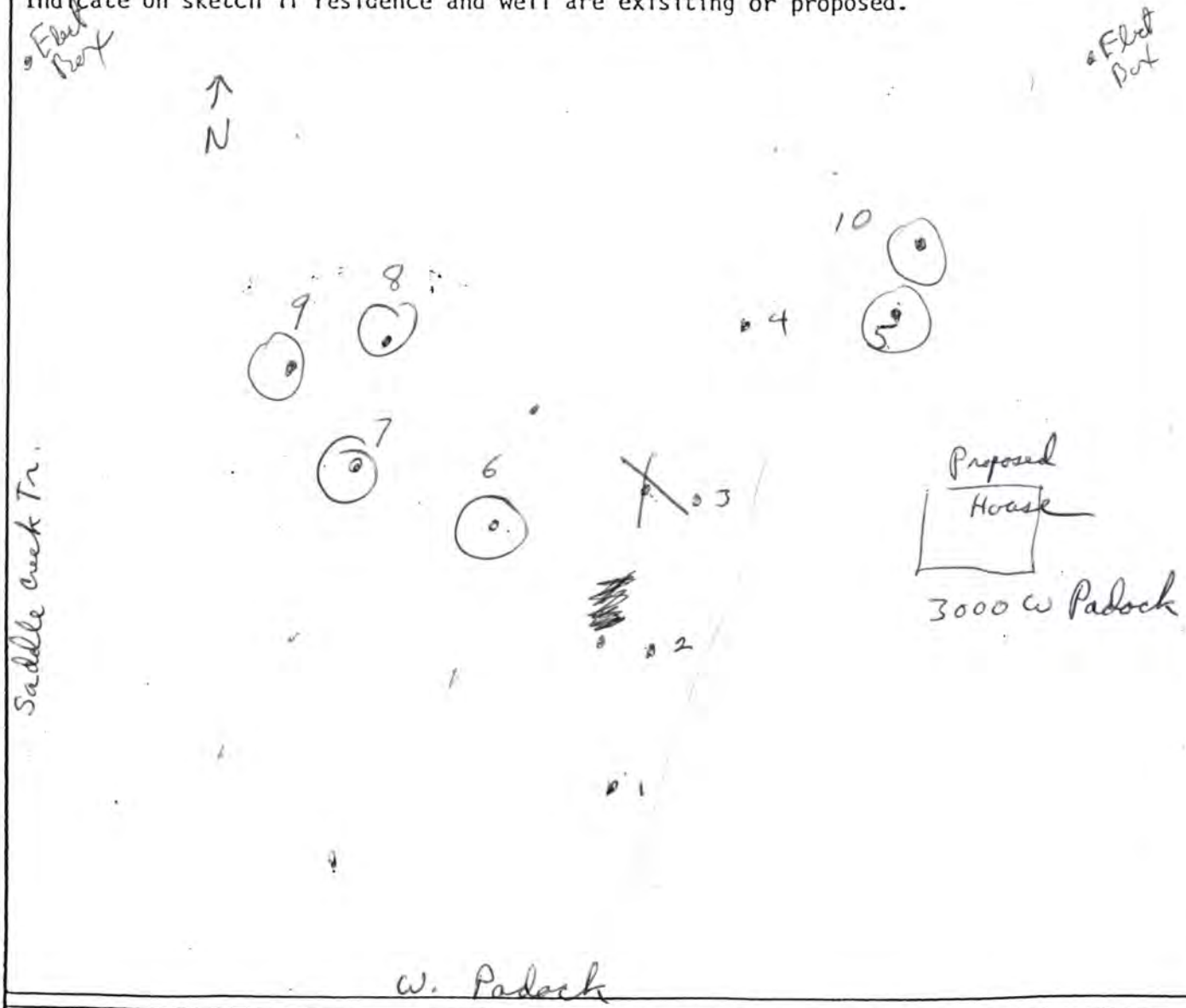
Date: August 10, 1992

Approved Percolation Rate (a)
A. 53 min./inch
B. _____ min./inch
C. _____ min./inch

Gerald C. Wood
Signature of Reviewing Official

FORM 20102-0477 PRELIMINARY PLANS & SPECIFICATIONS FOR SEWAGE DISPOSAL SYSTEM (Annex to Application) City Ordinance No. 9150 ☐ County Resolution No. 2832 ☒	LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT Division of Environmental Health 2200 St. Marys Avenue Lincoln, Nebraska 68502 Phone: 471-7800 **C**
Sketch of property showing Percolation Test hole locations, well, residence, direction and property line.	FILE NO. _____

Indicate on sketch if residence and well are exisiting or proposed.



REVIEWING ACTION

Remarks: _____

Date: August 10, 1992

Minimum Design Requirement
1. Capacity of Septic Tank 1000 gals.
2. Total Length of Laterals _____ ft.
3. With a Trench Width of _____ in.
4. Total Area of Lateral needed 930 sq.ft.

Gerrold C. Hood
Signature of Reviewing Official

RECEIVED SEP 2 3 1992

FORM 20104-0477
PLANS & SPECIFICATIONS FOR SEWAGE DISPOSAL SYSTEM (Annex to Application)
City Ordinance No. 9150 ☐
County Resolution No. 2832 ☐

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502
Phone: 471-7800

D

DATE: _____

FILE NO. _____

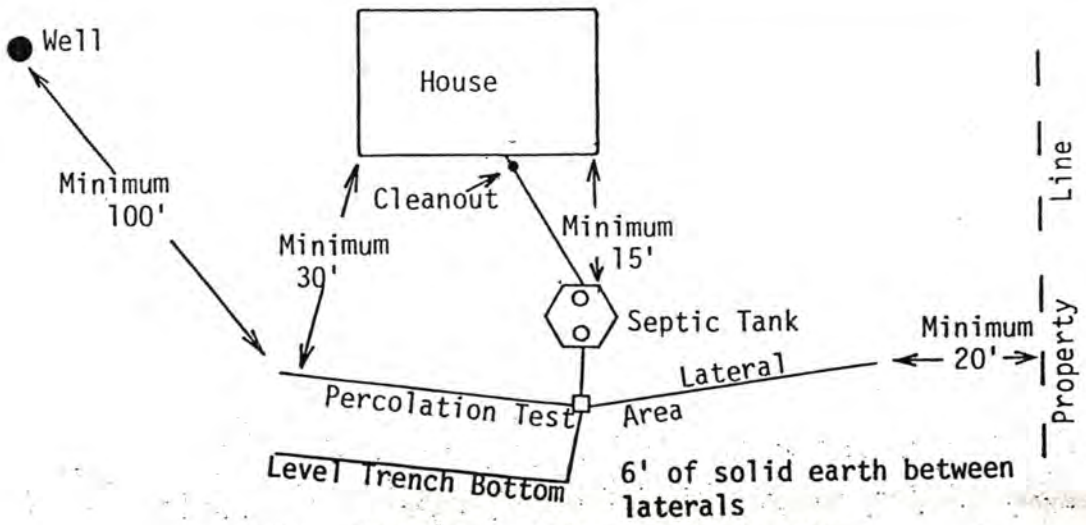
SPECIFICATIONS AS BUILT

A. BUILDING SEWER:
1. Material Class 160; Diameter 4 in.
2. Distance above basement floor _____ in., or below basement floor 10 in.
3. Distance between dwelling and septic tank 70 ft.
4. Number of clean-outs —.
5. Distances to:
Well or Suction Line _____ ft.;
Stream _____ ft.; Pressure Line _____ ft.; Property Line _____ ft.

B. SEPTIC TANK:
1. Material Precast; No. of compartments _____.
2. Capacity 1000 gals.;
3. Factory Built: Yes ☒ No ☐
(Company _____)
4. Manholes: Over Inlet; diam. _____ in.
Over Outlet; diam. _____ in.
Riser Above ☐ Below ☐ Grade ___ in.
5. Inlet: Baffle ☐ ; or Tee ☐
6. Outlet: Baffle ☐ ; or Tee ☐
7. Depth of top of tank below finished grade 10 in.
8. Distances to:
Well or Suction Line — ft.;
Stream _____ ft.; Pressure Line _____ ft.; Property Line _____ ft.

C. DISTRIBUTION BOX:
1. Material Precast; Number - available outlets _____.
2. Factory Built: Yes ☒ No ☐
(Company _____)
3. Distance from Septic Tank 10 ft.

D. ABSORPTION FIELD: (Provide as built drawings on back of this form)
1. Type: Half Rounds ☐ Perforated Pipe ☒
Diameter of Half Round _____ or
Perforated Pipe 4.
Material: fiberglass ☐ ; plastic ☒ ; concrete ☐ ; other _____.
2. Lateral Lines:
Number 4; Length of each line 100, 100, 100, 100, _____ ft.;
Total length of laterals 400 ft.;
Distance between lateral lines 10 ft.
3. Trench dimensions: Width 3 ft.;
Slope 4 in/100 ft.; Average Depth 36 in.
4. Filter Material: Road Gravel
Depth of Material 14 in.
5. Distances to:
Well or Suction Line _____ ft.;
Stream _____ ft.; Pressure Line _____ ft.; Property Line _____ ft.



TYPICAL INDIVIDUAL SEWAGE SYSTEM DESIGN

Wants 24 hr notice prior to inspect IDR

014

Lincoln-Lancaster County Health Department

3140 "N" Street, Lincoln, Nebraska 68510 Phone: 441-8022

REAL ESTATE TRANSFER/LOAN APPROVAL FORM

This form must be completed and returned to request a real estate transfer inspection.

MAKE CHECK PAYABLE TO: Lincoln-Lancaster County Health Department or LLCHD

☑ Enclosed is $150.00. Allow two weeks for processing. Incomplete information will delay processing.

☑ Evaluation of the Individual Water System ☑ Evaluation of the Sewage Disposal System

Legal Description of Property: Street Address 3000 W. Paddock Road LYON

Twp 9N Range 6E Section 17 1/4 ___ 1/4 ___ Block 4 Lot 2 Addition Hitching Post Hills 3rd

Directions to Property DENTON Rd TO SW 33rd ; N ON SW 33rd TO PLEASANT HILL Rd TO Saddle Creek

Location of Well East of residential dwelling Tap Location: Inside ☐ Outside ☑

Location of Sewage System NW of residential dwelling Year Installed 1992

	NAME	ADDRESS	PHONE
Present Owner:	John Cerrito	3000 W. Paddock Rd	489-2339
Tenant/Buyer:	William Tracewell	33 Pinecrest Dr Yutan NE 68073	625-2757
Return to:	Sherree Wilson HOME REAL ESTATE-CENTER	4444 O STREET Lincoln, NE 68510	440-3417

Craig Loeck, Woods Bros Realty

Signature of Applicant William A. Tracewell Address 33 Pinecrest Dr Yutan NE 68073 Date 6/7/97

HEALTH DEPARTMENT USE ONLY

Date Received 6/11/97 JS Received $150.00 Check ☑ Cash ☐ 1540

PRELIMINARY STATUS–By Jerrold C. Hood **DATE:** 6/13/97

WATER SYSTEM:	Approved	Disapproved
Construction	☒	☐
Bacteria	☒ 0 /ml	☐ ___ /ml
Nitrate	☒ <0.1 ppm	☐ ___ ppm

SEWAGE SYSTEM	
Approved	☒
Provisional	☐
Disapproved	☐

Additional Site Visits

Date ___/___/___ by ___

Date ___/___/___ by ___

Date ___/___/___ by ___

Comments: IF SEPTIC TANK HAS NOT BEEN PUMPED RECENTLY IT SHOULD BE CHECKED TO SEE IF IT IS NEEDED. PROBABLY CHECK TO SEE IF DISTRIBUTION BOX HAS TILTED NORTHEAST LATERAL SEEMS TO BE GETTING MOST OF EFFLUENT THEN SOUTHEAST LATERAL. OTHER TWO LATERALS DON'T SEEM TO BE GETING MUCH See Attached Letter ☐

FINAL STATUS IF ANY. PUT DIRT AT END OF NORTHEAST LATERAL IT HAS SUNKEN IN.

WATER SYSTEM: Approved: ☒ **SEWAGE DISPOSAL SYSTEM** Approved: ☒ Provisional Approval: ☐

Approved by Jerrold C. Hood R.E.H.S. Date 6/18/97

Approval or disapproval is based on State and local standards for construction, location and water quality. Inspection is based on visible construction and operation at the time of inspection. Approval or provisional approval does not imply or express a guarantee of system operations.

Larry Schwarek

9-22-92

↑
North

3000 w Padock
Lt 2 Blk 4

